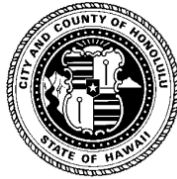


CITY AND COUNTY OF HONOLULU

530 SOUTH KING STREET, ROOM 300 | HONOLULU, HAWAII 96813
Telephone: (808) 523-4141 | Fax: (808) 527-5552 | Internet: www.honolulu.gov

MUFI HANNEMANN
MAYOR



April 6, 2006

Mayor's Anti-Drug Community Fund

Dear Grant Applicant:

The Honolulu City and County Office of the Mayor is administering funds appropriated by the State Legislature and matched by the City and County for Community Anti-Drug initiatives. This fund was established to fund grassroots community efforts to sustain, foster, and initiate anti-drug campaigns. The Mayor's Task Force on Drug Abuse will participate in the review of grant proposals and will be looking for projects that propose activities to address the goal(s) of sustained or increased alcohol and/or other drug prevention, education and/or awareness activities within communities in Honolulu County. Collaboration among recipients of these grants is encouraged.

Funded projects will be working collaboratively with the Mayor's Task Force on Drug Abuse on an exciting and ambitious new campaign to establish a drug-free City and County workforce. Recipients of these funds will be asked to invite and involve City and County employees in their projects, in order to increase alcohol and other drug awareness within the City and County work force as well as within the community targeted by the project.

Who qualifies to apply for these funds? Community-based 501(c)(3) organizations and governmental agencies

What funding is available? Projects may not exceed \$5,000 and only one project will be awarded to any one 501(c)(3) organization. Funds will be awarded to projects that are planned for the future and will not be awarded to projects that have already happened.

What is the time frame for the project? Proposals must be received by the Office of the Mayor by close of business, 4:30 p.m. on May 31, 2006. Proposals will be reviewed and decision and notification made by June 8, 2006. The project is to be completed by December 31, 2006. A final report, including expenditures and evaluation, is due to the City and County by February 28, 2007.

Who is the target population? Your proposal can target any population within the Honolulu County. You will be asked in the proposal to describe your target population and estimate the number of individuals to be impacted by your project.

How does an agency apply for these funds? A 501(c)(3) agency must submit the original plus three copies of a completed grant proposal form along with one copy of official notification that the organization is designated by the IRS as a 501(c)(3) tax exempt organization. The grant application form is available through the Office of the Mayor, phone (808) 527-6090 and/or on the web at www.honolulu.gov/mayor/index.htm. Only completed applications will be reviewed and considered for funding. The original and 3 copies of your completed proposal and one copy of the organization's 501(c)(3) letter must be received no later than 4:30 p.m. on May 31, 2006, at the Office of the Mayor, 530 South King Street, Room 306, Honolulu, Hawaii 96813.

Governmental agency applicants do not need to submit verification of tax exempt status.

Who to call for questions – If you have a question regarding this announcement or the application form, please call Isaac Hokama, Office of the Mayor, 527-6090, fax 523-4242, e-mail: ihokama1@honolulu.gov

Grant Proposal Application Form

Organization Name: _____

Address: _____ **Zip Code:** _____

Contact Name: _____ **Phone:** _____ **E-Mail:** _____

Date of 501(c)(3) designation: _____ (not required for governmental agencies)

Which category best describes your target population?

- ☐ Children ☐ Adolescents ☐ Teens ☐ Adults ☐ Family
- ☐ Community ☐ Other (specify) _____

Check the categories that best describe your project (check all that apply):

- | | | |
|--|---|---|
| <input type="checkbox"/> Sports/Recreation | <input type="checkbox"/> Culture/Arts | <input type="checkbox"/> Education |
| <input type="checkbox"/> Parenting | <input type="checkbox"/> Family Activities | <input type="checkbox"/> Public awareness |
| <input type="checkbox"/> One-time event | <input type="checkbox"/> Ongoing activities | <input type="checkbox"/> Mentoring |

Amount Requested: \$ _____ **Expected Completion Date:** _____

I. Project Description

A. What activities will you do?

B. Where will your project take place?

C. How will your project meet the goal of “sustained or increased alcohol and/or other drug prevention, education and/or awareness activities within communities in Honolulu County”?

D. Who is your target population (i.e. age, location)? How many will benefit from this project?

E. Will you be collaborating with any other grant recipients? ____Yes ____No
If yes, with what other agency? (please name) _____
What benefit do you expect as a result of this collaboration?

How will you measure this benefit?

F. What will be different in your community because of this project?

G. How do you propose to incorporate the volunteer time of one or more City and County employees in this project? Please specify the type of work, number of hours and when you think the employee(s) would be participating.

H. Would your organization be willing to also spend 1-2 hours with the City and County employee(s) to provide alcohol and/or other drug education and to explain what your organization is doing to prevent, intervene, and/or treat addictions (in addition to this project for which you are requesting funding)? _____ YES _____ No
If you checked 'No' to the above, please explain:

II. Organization's Background

A. What is the main mission of the organization?

B. What are the main services the organization provides?

C. Who is the main target population of the organization's services?

III. Budget

Please use this grid to present your budget or attach a detailed budget.

Description of Expenditure	\$ Amount
TOTAL	

Please list any "in kind" contributions such as labor, professional services, materials or other donations you expect to receive:

The following is a SAMPLE budget ...

Description of Expenditure	\$ Amount
Purchased Supplies (art supplies, lumber, etc.)	\$ 2,000.00
Facility Rental	\$ 350.00
Photocopying/Postage/Printing	\$ 350.00
Reimbursements (e.g. mileage)	\$ 100.00
Refreshments (alcohol costs not allowed)	\$ 200.00
Project Coordinator	\$ 2,000.00
Project Total	\$ 5,000.00
In kind: Volunteer labor, borrowed equipment, some refreshments	

I attest to the accuracy of the information included in this application. I also understand that a final report will be due no later than February 28, 2007 and that failure to comply with this requirement will preclude future consideration for any Honolulu Mayor's Anti-Drug Fund grants.

Signature:

Director/CEO of Applicant Organization

Date

Print Name: _____

Submit the original and 3 copies of this application and 1 copy of your organization's 501(c)(3) letter, if required, to the Office of the Mayor, 530 S. King St., Room 306, Honolulu, HI 96813, no later than 4:30 p.m. May 31, 2006.